#### FORM D

SEC Mail www.processing Section

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

First 1.3 2008

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

Washington, DC UNIFORM LIMITED OFFERING EXEMPTION 108

14299	10						
OMB APP	OMB APPROVAL						
OMB Number: Expires: Estimated average bu hours per response							
SEC USE	ONLY						
Prefix	Serial						
DATE RECEIVED							
1	l l						

Name of Offering ( check if this is	an amendment and name h	nas changed, and indi	cate change.)		
Sale of Series A Preferred Stock	and any common sto	ck issuable upon c	onversion thereof		
Filing Under (Check box(es) that appl		Rule 505	Rule 506	Section 4(6)	□ ULOE
Type of Filing: New Filing	_				
	A.	BASIC IDENTII	ICATION DATA	·- <u></u>	
1. Enter the information requested abo	out the issuer.				
Name of Issuer ( check if this is an	amendment and name has	changed, and indicat	e change.)		
BVI Networks, Inc.			<u> </u>		
Address of Executive Offices		(Number and Stree	t, City, State, Zip Cod	e) Telephone Nun	nber (Including Area Code
465 Fairchild Dr., Suite 124, Mo	untain View, CA 9404	43	·	408-799-8324	
Address of Principal Business Operati	ons	(Number and Stree	t City, State, Zip Cod	e) Telephone Nun	nber (Including Area Code)
(if different from Executive Offices)		PA	<b>JCESSED</b>		
	·	HAA	D 0 0 0000		<u></u> -
Brief Description of Business		MA	R 2 0 2008 , ,	<b>//</b>	18/18/14 88/14 818/14 81888 WHI (1886) WEL (1887 :
Video surveillance management	and software develop	ment TL	IOMSON M		
Type of Business Organization			NANCIAL _		7
	☐ limited partners	ship, already formed	AMICIAL [] of	ner (plea:	08042371
☐ business trust	☐ limited partners	ship, to be formed			
		Month	Year		
Actual or Estimated Date of Incorpora		1 1	0 7	🖾 Actual 🗌	] Estimated
Jurisdiction of Incorporation or Organ	·		Service Abbreviation (		
	CN for t	Canada: FN for other	foreign inrisdiction)	D	Eİ

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered orcertified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION
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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

	A. BASIC IDENTI	FICATION DATA		·
Enter the information requested for the folk     Each promoter of the issuer, if the issuer the Each beneficial owner having the power the Each executive officer and director of core that Each general and managing partner of partners.	nas been organized within the page of vote or dispose, or direct the value of corporate properties.	ote or disposition of, 10% or n	nore of a class of eq of partnership issue	uity securities of the issuer; rs; and
Check Box(es) that Apply: Promoter	Beneficial Owner		☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Agratchev, Alexei				
Business or Residence Address (Number and S				
c/o BVI Networks, Inc., 465 Fairchild Dr., S	uite 124, Mountain View, (			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)  Popov, Constantin				
Business or Residence Address (Number and S	Street, City, State, Zip Code)			
c/o BVI Networks, Inc., 465 Fairchild Dr., S	uite 124, Mountain View, (			
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer		General and/or Managing Partner
Full Name (Last name first, if individual) Chen, Anson				
Business or Residence Address (Number and S	Street, City, State, Zip Code)			
c/o BVI Networks, Inc., 465 Fairchild Dr., S	uite 124, Mountain View,	CA 94043		
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or  Managing Partner
Full Name (Last name first, if individual)				· · · · · · · · · · · · · · · · · · ·
Business or Residence Address (Number and S	Street, City, State, Zip Code	)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code	)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code	)		
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code	)		

•	A. BASIC IDENT	IFICATION DATA					
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>							
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and S	Street, City, State, Zip Code	)					
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and S	Street, City, State, Zip Code	)					
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, if individual)			•				
Business or Residence Address (Number and S	Street, City, State, Zip Code	)					
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and	Street, City, State, Zip Code						
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and	Street, City, State, Zip Code	)					
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and	Street, City, State, Zip Code	)					
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if individual)							
Business or Residence Address (Number and	Street, City, State, Zip Code	)	•••				

					B. IN	NFORMAT	ION ABO	UT OFFEI	RING				
	•		<u>.</u>									Yes	No
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE.										$\boxtimes$		
2.	What is	the minime	um investme	ent that will	be accepto	ed from any	individual	?			•••••	Yes	N/A · No
3.			ermit joint o									$\boxtimes$	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								C and/or					
Full	Name (1	ast name f	irst, if indiv	idual)									
Busi	iness or l	Residence A	Address (Nu	mber and S	Street, City	, State, Zip	Code)		•				
Nan	ne of Ass	sociated Bro	oker or Deal	ler					<u></u>				
			Listed Has						· · · ·				
	eck "All [AL]	States" or o	heck individual	duals States [AR]	s). [CA]	All Stat [CO]	es [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[Ml]	[MN]	[MS]	[MO]
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	{WI}	[WY]	[PR]
Full	Name (I	ast name f	irst, if indiv	idual)	<u>.</u>								
Bus	iness or	Residence A	Address (Nu	imber and S	Street, City	, State, Zip	Code)			· · · · · · · · · · · · · · · · · · ·			
Nan	ne of Ass	sociated Bro	oker or Deal	ler									
			Listed Has			Solicit Pur		·	· · ·				
	eck "All [AL]	States or of [AK]	check indivi [AZ]	duals States	(CA]	[CO]	es [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[MT]	[NÉ]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[PR]
Full	Name (	Last name t	first, if indiv	ridual)	-,		<del>.</del>	٠.					
Bus	iness or	Residence	Address (Nu	imber and S	Street, City	, State, Zip	Code)						
Nan	ne of As	sociated Br	oker or Dea	ler									
			Listed Has check indivi			Solicit Pur All Stat							
	(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[11.]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[YY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF I	PROCEEDS	
l.	control of the contro	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Dett	\$	\$
	Equity	\$ 2,250,000.00	\$ <u>1,931,296.58</u>
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$ <u> </u>
	Partnership Interests	\$	
	Other (Specify)	\$	\$
	Total	\$ 2,250,000.00	\$1,931,296.58
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchase
	Accredited Investors	8	\$ 1,931,296.58
	Non-accredited Investors	0	\$
	Total (for filings under Rule 504 only)	0	\$0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	i f Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		<u>\$</u>
	Regulation A		\$
	Rule 504		\$
	Total	_	\$0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	у	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	$\boxtimes$	\$ 15,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	$\boxtimes$	\$ 15,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS							
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$ 2,235,000.00					
i,	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		Payments to Others					
	Salaries and fees	S 8	\$0.00					
	Purchase of real estate	S 0.00	S 0.06					
	Purchase, rental or leasing and installation of machinery and equipment	S \$	<b>5</b> 0.00					
		S 0.00	\$0.00					
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$ <u>0.00</u>	\$0.00					
	Repayment of indebtedness	S 8	\$					
	Working capital	S. 0.00	\$ 2,235,000.00					
		S 8	\$0.00					
:oli		<b>\$</b> 0.00	<b>⊠</b> \$ 2,235,000.00					

Total Payments Listed (column totals added).....

2,235,000.00

D	FFD	FR	٩T.	SIGNA	THRE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date
BVI Networks, Inc.		March 7, 2008
Name of Signer (Print or Type)	Title or Signer (Print or Type)	
Alexei Agratchev	President	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18. U.S.C. 1001.)

	E. STATE SIGNATURE		
l.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a (17 CFR 239.500) at such times as required by state law.	notice on For	rm D

- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
BV1 Networks, Inc.		March 7, 2008
Name (Print or Type)	Title (Print or Type)	
Alexei Agratchev	President	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

<u>_</u>	2		3	4 5						
·	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State AL	Yes		Sale of Series A Preferred Stock and any common stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AK	-	-								
AZ							· ··-			
ΛR		<u> </u>		<u> </u>						
CA		X	\$2,250,000.00	3	\$130,611.65	0	\$0.00		X	
CO		х	\$2,250,000.00	1	\$1,300,000.00	0	\$0.00		X	
СТ										
DE'										
DC										
Fl.	-			•						
GA										
НІ										
ID										
II.		Х	\$2,250,000.00	1	\$100,000.00	0	\$0.00		X	
ĺŊ										
ĺΑ										
KS										
KY										
LA										
ME										
MD										
MA										
MI										
MN			·							
MS	1									

## APPENDIX

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	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price	Type of investor and amount purchased in State  (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)	
State	Yes		Sale of Series A Preferred Stock and any common stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО		х	\$2,250,000.00	2	\$300,000.00	0	\$0.00		X	
МΊ										
NE			,	-						
NV										
NH									<u> </u>	
NJ								<u></u>		
NM										
NY	-									
NC										
ND			-	-			-			
OH										
ОК										
OR										
PA										
RI										
SC										
SD										
TN				-						
TX										
UT										
VΤ					·					
VA	1									
WA	1									
wv	1									
WI										

## APPENDIX

1	7		3	4					5	
<u> </u>	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)		
State	Yes		Sale of Series A Preferred Stock and any common stock issuable upon conversion thereof	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PK										
UK		X	\$2,500,000.00	1	\$100,684.93	0	\$0.00		X	

